

Urban District of Stanley

ANNUAL REPORT

of the

Medical Officer of Health

(A. L. TAYLOR, M.D., Ch.B., D.P.H.)

and the

Public Health Inspector

(D. WALKER, Cert. R.S.H., A.R.S.H., M.A.P.H.I.)

1961

WAKEFIELD

W. W. MILNES (SUDDS) LTD.

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STANLEY URBAN DISTRICT COUNCIL

ANNUAL REPORT

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Medical Officer of Health,

1961.

To the Chairman and Members of the
Stanley Urban District Council.

Mr. Chairman and Gentlemen,

Here is my Report for 1961. I am glad to tell you that in almost every respect the health and wellbeing of your community have maintained the high standards which one has come to expect, but which are by no means automatic. A slight rise in the Birth Rate may reflect the earlier age at which young couples are now marrying and the increased standard of living which the community is enjoying.

The Infantile Death Rate, whilst not quite as low as last year, is still very good, and the incidence of Infectious Disease has been negligible. More particularly I would point to the complete absence of Whooping Cough, of which more later in the Report. The figures relating to Tuberculosis were more satisfactory than last year's. I will make further comment in the appropriate section of the Report.

In the field of Mental Health, the fruits of the Mental Health Act are now beginning to be reaped, and much progress is being made. We are awaiting the completion of the new Occupation Centre to cater for 50 persons which is in the process of being built in Rothwell.

The general administration of the Public Health Service in your area has continued unchanged, and no adverse incident has arisen during the year. There has been a continuance of all-round happy relationships with free exchange of information and help.

May I express my continued appreciation of the universal kindness which I have received from yourselves. To the Clerk and Senior Officials of the Council also I would like to say 'thank you' for their unfailing kindness and courtesy.

I remain, Gentlemen,

Yours faithfully,

A. L. TAYLOR,

Medical Officer of Health.

STANLEY URBAN DISTRICT COUNCIL

STATISTICAL MEMORANDA FOR 1961

Area in Acres	...	...	...	5,169
Registrar General's Estimate of Population for 1961				16,960
Number of Inhabited Houses, 1961, according to Rate Book	...	...	...	5,768
Rateable Value, Year commencing 1.4.61			...	£126,880
Net Product of a Penny Rate, Year commencing 1.4.61				£481

VITAL STATISTICS IN 1961

				M.	F.	Total
Live Births.						
Legitimate	...	...	...	138	125	263
Illegitimate	...	...	...	5	6	11
Total				143	131	274

Live Birth Rate per 1,000 population (adjusted) 15·83

Still Births.

Legitimate	...	...	...	2	3	5
Illegitimate	...	...	...	—	—	—
Total				2	3	5

Still Birth Rate per 1,000 live and still births 17·92

Birth Rate (live and still) per 1,000 of the estimated resident population (adjusted) 16·45

Deaths.

				M.	F.	Total
All Ages	...	...	...	115	83	195

Death Rate per 1,000 of the estimated resident population (adjusted) ... 14·25

	M.	F.	Total
Deaths of Infants under 1 year ...	2	3	5
Death Rate of Infants under 1 year :—			
All Infants per 1,000 live births ...			18·25
Legitimate Infants per 1,000 legitimate live births ...			19·01
Illegitimate Infants per 1,000 illegitimate live births ...			0·0
Neo-natal Mortality Rate per 1,000 live births			10·95
Illegitimate live births per cent. of total live births			4·01
Deaths from Diarrhoea (under 2 years of age)			0
Rate per 1,000 population ...	...		0·0
Rate per 1,000 live births ...	...		0·0
Deaths from Measles (all ages) ...	...		0
Deaths from Whooping Cough (all ages) ...	...		0
Deaths from Cancer (all ages) ...	...		39

Maternal Mortality.

Deaths ...	...	0
Rate per 1,000 (live and still) births	...	0·0

RECORD OF DEATHS IN AGE GROUPS, 1961

Age				Males	Females	Total
Under 1 year	...			2	3	5
1—5 years	...	...		—	—	—
5—10	„	...	...	—	1	1
10—15	„	...	...	—	—	—
15—20	„	...	...	1	2	3
20—25	„	...	...	3	1	4
25—35	„	...	...	—	—	—
35—45	„	...	...	4	2	6
45—55	„	...	...	13	7	20
55—65	„	...	...	22	12	34
65—70	„	...	...	18	5	23
70—75	„	...	...	15	10	25
75—80	„	...	...	20	14	34
80—85	„	...	...	7	16	23
85—90	„	...	...	9	6	15
Over 90 years...	...			1	4	5
Totals				115	83	198

PRINCIPAL VITAL STATISTICS FOR THE YEAR 1961

				Urban District of Stanley	Aggregate of Urban Districts	Aggregate of Rural Districts	West Riding Admin. County	England and Wales
Population	..	..	..	16,960	1,189,510	468,300	1,657,810	*
Births	{	Live	..	274	19,910	8,643	28,553	*
		Still	..	5	401	189	590	*
		Total	..	279	20,311	8,832	29,143	*
Deaths of Infants	{	Under 1 week		3	279	129	408	*
		Under 4 weeks		3	319	151	470	*
		Under 1 year		5	481	222	703	*
Deaths (all causes)	..	..	..	198	15,173	4,822	19,995	*

CRUDE AND ADJUSTED RATES

Live Birth	..	..	..	16.2	16.7	18.5	17.2	17.4
Adjusted Live Birth	..	..	..	15.8	16.9	18.5	17.4	
Death (All causes)	..	..	..	11.7	12.8	10.3	12.1	12.0
Adjusted Death	..	..	..	14.2	13.7	12.8	13.4	
Infective and Para. Dis. excl. Tub. but incl. Syph. & other V.D.				—	0.05	0.05	0.05	*
Tuberculosis, Respiratory				—	0.06	0.07	0.06	0.07
Tuberculosis, Other				0.06	0.00	—	0.00	0.01
Tuberculosis, All Forms				0.06	0.06	0.07	0.07	0.07
Cancer				2.30	2.09	1.71	1.98	2.16
Vascular lesions of Nervous system				1.71	1.97	1.49	1.84	*
Heart and Circulatory Disease				4.19	4.79	3.75	4.50	*
Respiratory Diseases				1.53	1.76	1.34	1.64	*
Maternal Mortality				—	0.30	0.23	0.27	0.33
Stillbirths				17.9	19.7	21.4	20.2	18.7
Perinatal Mortality				28.7	33.5	36.0	34.2	*
Neo-natal Mortality				10.9	16.0	17.5	16.5	15.5
Infant Mortality				18.2	24.2	25.7	24.6	21.4

* Figures not available.

All the maternal mortality, still birth and perinatal mortality rates are per 1,000 live and still births.

PUBLIC HEALTH OFFICERS:

MEDICAL OFFICER OF HEALTH (part-time) :—

DR. A. L. TAYLOR, M.D., D.P.H.

SENIOR PUBLIC HEALTH INSPECTOR:—

D. WALKER, CERT. R.S.H., A.R.S.H., M.A.P.H.I.,
Certified Inspector of Meat and Other Foods.

ADDITIONAL PUBLIC HEALTH INSPECTOR:—

N. BUCKLE, CERT. R.S.H., A.R.S.H., M.A.P.H.I.,
Certified Inspector of Meat and Other Foods.

PUPIL PUBLIC HEALTH INSPECTOR:—

D. POWERS.

CLERK:—

Mrs. Wood.

COMMENTS ON STATISTICAL DATA

It was, perhaps, too much to hope that the exceptionally low Infantile Mortality Rate recorded for 1960 would be maintained. However, the figure for 1961, which records a death rate of 18.25, can be considered reasonably satisfactory, and a glance at the table will confirm that almost without exception the deaths were associated with abnormalities which would have made normal life impossible for the infant.

The Death Rate is average for the Country. As is to be expected from the increasing expectation of life in the population, the vast majority of deaths are due to degenerative conditions. In this, our experience is parallel with that of the rest of the Country. I feel it necessary to draw attention once again to the incidence of lung cancer. This has been responsible for no fewer than 9 deaths in your District during the year. I will not weary you by repeating my previous comments on the relationship between excessive cigarette smoking and this disease. My opinion remains unchanged, and is in conformity with the overwhelming majority of medical opinion.

No Maternal Death occurred during the year.

Infectious Disease was negligible and no epidemic was recorded.

All in all, the statistics in this Report can be considered satisfactory.

CAUSES OF DEATH IN THE STANLEY URBAN DISTRICT, 1961

CAUSE OF DEATH				MALES.	FEMALES.
All Causes				115	83
1. Tuberculosis, respiratory	..	..	..	..	..
2. Tuberculosis, other	..	..	..	..	1
3. Syphilitic disease	..	..	..	..	..
4. Diphtheria	..	..	..	..	..
5. Whooping Cough	..	..	..	..	..
6. Meningococcal infections	..	..	..	..	..
7. Acute Poliomyelitis	..	..	..	..	..
8. Measles	..	..	..	..	..
9. Other infective and parasitic diseases	..	..	..	..	..
10. Malignant neoplasm, stomach	..	..	..	6	2
11. Malignant neoplasm, lung, bronchus	..	..	..	8	1
12. Malignant neoplasm, breast	..	..	..	..	4
13. Malignant neoplasm, uterus	..	..	..	..	1
14. Malignant neoplasm, other	..	..	..	8	9
15. Leukaemia, aleukaemia	..	..	..	..	..
16. Diabetes	..	..	..	..	..
17. Vascular lesions of nervous system	..	..	..	15	14
18. Coronary disease, angina	..	..	..	32	9
19. Hypertension with heart disease	..	..	..	3	3
20. Other heart disease	..	..	..	7	14
21. Other circulatory disease	..	..	..	3	..
22. Influenza	..	..	..	..	2
23. Pneumonia	..	..	..	3	7
24. Bronchitis	..	..	..	9	3
25. Other disease of the respiratory system	..	..	..	1	1
26. Ulcer of stomach and duodenum	..	..	..	2	..
27. Gastritis, enteritis and diarrhoea	..	..	..	..	2
28. Nephritis and nephrosis	..	..	..	..	..
29. Hyperplasia of prostate	..	..	..	2	..
30. Pregnancy, childbirth, abortion	..	..	..	..	..
31. Congenital malformations	..	..	..	..	2
32. Other defined and ill-defined diseases	..	..	..	8	4
33. Motor vehicle accidents	..	..	..	4	2
34. All other accidents	..	..	..	4	2
35. Suicide	..	..	..	..	..
36. Homicide and operations of war	..	..	..	..	..
Live Births.	Total	..	..	143	131
	Legitimate	..	..	138	125
	Illegitimate	..	..	5	6
Still-Births.	Total	..	..	2	3
	Legitimate	..	..	2	3
	Illegitimate	..	..	..	..
Deaths of Infants under 1 year of age.	Total	..	..	2	3
	Legitimate	..	..	2	3
	Illegitimate	..	..	..	..
Population				16,960	
Comparability Factors :—					
Births				0.98	
Deaths				1.22	

INFANT MORTALITY IN 1961

Deaths from Stated Causes under One Year of Age

CAUSE OF DEATH.		Under 1 Week.	1—2 Weeks.	2—3 Weeks.	3—4 Weeks.	Total under 1 Month.	1—3 Months.	3—6 Months.	6—9 Months.	9—12 Months.	Total under 1 Year.
Broncho pneumonia	..	-	-	-	-	-	1	-	-	-	1
Epileptic fit	}	-	-	-	-	-	-	-	-	1	1
Congenital cardiac		-	-	-	-	-	-	-	-	-	-
vascular anomaly		-	-	-	-	-	-	-	-	-	-
Mongolism		-	-	-	-	-	-	-	-	-	-
Prematurity (29 weeks gestation)	}	1	-	-	-	1	-	-	-	-	1
Multiple congenital deformities	}	1	-	-	-	1	-	-	-	-	1
Prematurity	}	1	-	-	-	1	-	-	-	-	1
Hydramnios		-	-	-	-	-	-	-	-	-	-
Totals	..	3	-	-	-	3	1	-	-	1	5

INFANT DEATHS PER THOUSAND LIVE BIRTHS

1922—1931		1932—1941		1942—1951		1952—1961	
1922	98.0	1932	84.5	1942	47.6	1952	33.3
1923	87.3	1933	56.1	1943	54.2	1953	21.3
1924	89.0	1934	85.0	1944	50.2	1954	48.2
1925	103.0	1935	30.1	1945	45.0	1955	24.3
1926	98.3	1936	34.7	1946	31.7	1956	17.3
1927	67.3	1937	29.4	1947	53.1	1957	20.2
1928	81.1	1938	69.5	1948	32.3	1958	22.6
1929	62.3	1939	42.9	1949	25.3	1959	39.1
1930	65.8	1940	72.3	1950	43.0	1960	14.6
1931	60.2	1941	37.8	1951	39.1	1961	18.2
Average— 81.2		Average— 54.2		Average— 42.1		Average— 25.9	

Details of STILLBIRTHS for the past five years

Year	No. of Live Births	No. of Still-Births	Proportion of Stillbirths per 100 Live Births
1957	248	8	3.2
1958	266	7	2.6
1959	256	2	0.8
1960	274	4	1.46
1961	274	5	1.92

Details of NEO-NATAL DEATHS for the past five years

Year	No. of Live Births	No. of Neo-Natal Deaths	Proportion of Neo-Natal deaths per 100 Live Births
1957	248	4	1.6
1958	266	3	1.1
1959	256	3	1.1
1960	274	3	1.1
1961	274	3	1.1

GENERAL PROVISION OF THE PREVENTIVE MEDICAL SERVICES IN THE AREA

There has been no change in the administrative set-up. The three associated Urban Districts constitute one Health Division with a population now in the region of 60,000 and destined, one feels, to expand still further. It is County Council policy to amalgamate Health Divisions with the ultimate object of ensuring an approximate population of 100,000. This proposal would have certain advantages in that it would then be possible to make coterminous the areas administered for such other Services as Education, Welfare, and the work of the Children's Department. However, as far as this area is concerned, co-operation with these Departments is excellent, and I cannot in all honesty feel that any material improvement would be possible.

The clerical staff of the Division are adequate and have capably coped with the constantly increasing volume of work.

Relationships with General Practitioners and Hospitals have remained excellent. I feel that general practitioners in the area are increasingly making use of the Public Health Services and are displaying much more readiness to contact us in relation to any problem in which our help might be useful. I should like to take this opportunity of thanking them in turn for the readiness with which necessary information is forthcoming.

As usual, there has been a certain amount of change in the constitution of the Nursing staff, but we have managed to maintain the usual high standard of work in all Departments.

The services of a part-time Ophthalmologist, a Consultant Paediatrician and Speech Therapist have remained available during the year.

The Mental Health Section has been most active, and a full account of this work will be included in this Report.

We are fortunate in continuing to enjoy the services of Mr. Sleight, who is the Dental Surgeon in charge of the Dental Clinic at Carlton Lane, Rothwell. His work has been greatly appreciated and his services made full use of.

A certain number of children in need of dental treatment go into Wakefield to the Central Dental Clinic.

SCHOOL MEDICAL SERVICE

As usual, I include the Divisional figures relating to the School Medical Service. We are lucky in that both Assistant County Medical Officers responsible for this work are active and enthusiastic. We are gradually bringing into being the new method of School Medical Inspection. You will remember that routine medical inspections are now thought by some to be largely unnecessary, and it is believed that much better work can be done by increased concentration on the relatively small number of children who are found to have some defect, be it of sight, hearing, behaviour, or other deviation from normal. We are putting this principle into practice and are so far finding the results good. The Head Teachers and their staffs have welcomed the change with enthusiasm and their co-operation is doing much to ensure the success of the new dispensation. I hope in my next Report to include a full account of the new system.

There has been some build-up of ophthalmic work during the year but I am hoping to put on sufficient additional sessions to clear off the arrears.

As usual I am happy to report on the pleasant relationship which continues to exist with the Divisional Education Officers and their staffs.

The acceptance rate for immunisation against the major diseases continues good, although some improvement is still possible and will be striven for.

SCHOOL MEDICAL SERVICE
MEDICAL INSPECTION AND TREATMENT
1961

Age Groups Inspected (by years of birth)	No. of Pupils inspected	Physical condition of Pupils Inspected			
		Satisfactory		Unsatisfactory	
		No.	% of Col. 2	No.	% of Col. 2
1957 and later	19	19	100	—	—
1956	648	648	100	—	—
1955	161	161	100	—	—
1954	388	388	100	—	—
1953	180	179	99·4	1	0·6
1952	70	70	100	—	—
1951	517	517	100	—	—
1950	116	115	99·14	1	0·86
1949	15	14	93·3	1	6·7
1948	6	6	100	—	—
1947	261	260	99·6	1	0·4
1946 and earlier	431	431	100	—	—
Total	2,762	2,758	99·9	4	0·1

**PUPILS FOUND TO REQUIRE TREATMENT AT
PERIODIC MEDICAL INSPECTIONS
(Excluding Dental Diseases and Infestation
with Vermin)**

Age Groups Inspected (by year of birth)	For Defective Vision (exclu- ding squint).	For any of the other conditions recorded	Total individual pupils.
1957 and later ...	—	6	6
1956 ...	30	67	93
1955 ...	6	12	17
1954 ...	16	32	44
1953 ...	7	16	23
1952 ...	1	4	5
1951 ...	24	40	63
1950 ...	6	12	17
1949 ...	1	1	2
1948 ...	1	—	1
1947 ...	31	18	46
1946 and earlier ...	31	38	66
Total ...	154	246	383

OTHER INSPECTIONS

Number of Special Inspections ...	41
Number of Re-inspections ...	46
	87

INFESTATION WITH VERMIN

Total number of individual examinations of pupils in schools by school nurses or other authorised persons	17,235
Total number of individual pupils found to be infected	109
Number of individual pupils in respect of whom cleansing notices were issued. (Section 54 (2), Education Act, 1944) ...	—
Number of individual pupils in respect of whom cleansing orders were issued. (Section 54 (3), Education Act, 1944) ...	—

**DEFECTS FOUND BY MEDICAL INSPECTION DURING
THE YEAR 1961
PERIODIC INSPECTIONS**

Defect or Disease.	PERIODIC INSPECTIONS							
	ENTRANTS		LEAVERS		OTHERS		TOTAL	
	Treat- ment	Obser- vation	Treat- ment	Obser- vation	Treat- ment	Obser- vation	Treat- ment	Obser- vation
Skin ...	12	2	13	—	39	—	64	2
Eyes—								
a. Vision ...	34	10	52	23	68	68	154	101
b. Squint ...	11	7	—	—	2	4	13	11
c. Other ...	1	—	1	1	1	—	3	1
Ears—								
a. Hearing ...	8	1	4	4	8	5	20	10
b. Otitis Media	21	—	3	—	5	1	29	1
c. Other ...	1	—	—	—	1	2	2	2
Nose and Throat ...	11	8	—	—	11	1	22	9
Speech ...	10	10	—	—	3	1	13	11
Lymphatic Glands ...	—	1	—	—	—	—	—	1
Heart ...	1	3	1	3	3	13	5	19
Lungs ...	9	3	1	1	9	4	19	8
Developmental—								
a. Hernia ...	1	—	—	—	1	—	2	—
b. Other ...	—	—	—	—	—	1	—	1
Orthopaedic—								
a. Posture ...	—	—	4	1	11	7	15	8
b. Feet ...	2	—	4	1	4	1	10	2
c. Other ...	3	3	1	3	2	8	6	14
Nervous System—								
a. Epilepsy ...	2	—	1	—	—	—	3	—
b. Other ...	1	—	—	—	1	—	2	—
Psychological—								
a. Development	—	—	—	—	2	1	2	1
b. Stability ...	—	1	—	—	5	2	5	3
Abdomen ...	1	—	—	1	3	—	4	1
Other ...	6	1	4	—	11	1	21	2
Totals ...	135	50	89	38	190	120	414	208

SPECIAL INSPECTIONS

Defect or Disease	Special Inspections	
	Pupils Requiring Treatment	Pupils Requiring Observation
Skin	—	—
Eyes—		
a. Vision	1	—
b. Squint	—	—
c. Other	—	—
Ears—		
a. Hearing	—	—
b. Otitis Media	—	—
c. Other	1	—
Nose and Throat	—	—
Speech	—	—
Lymphatic Glands	—	—
Heart	—	—
Lungs	—	—
Developmental—		
a. Hernia	—	—
b. Other	—	—
Orthopaedic—		
a. Posture	—	—
b. Feet	—	—
c. Other	—	—
Nervous System—		
a. Epilepsy	—	—
b. Other	—	—
Psychological—		
a. Development	—	1
b. Stability	—	—
Abdomen	—	—
Other	—	—

TREATMENT OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	3
Errors of Refraction (including squint) ...	660
Total ...	663
Number of pupils for whom spectacles were prescribed ...	475

DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been dealt with
Received operative treatment	
(a) for diseases of the ear ...	2
(b) for adenoids and chronic tonsillitis ...	5
(c) for other nose and throat conditions ...	—
Received other forms of treat- ment ...	—
Total ...	7
Total number of pupils in schools who are known to have been provided with hearing aids—	
(a) in 1961 ...	1
(b) in previous years ...	9

ORTHOPAEDIC AND POSTURAL DEFECTS

	No. of cases known to have been dealt with
Pupils treated at clinics or out- patients departments ...	—
Pupils treated at school for postural defects ...	—
Total ...	—

DISEASES OF THE SKIN (Excluding uncleanliness)

	Number of cases known to have been treated
Ringworm— (a) Scalp ...	—
(b) Body ...	—
Scabies ...	—
Impetigo ...	3
Other skin diseases ...	3
Total ...	6

CHILD GUIDANCE TREATMENT

	Number of cases known to have been treated
Pupils treated at Child Guid- ance Clinics ...	12

SPEECH THERAPY

	Number of cases known to have been treated
Pupils treated by speech thera- pists ...	69

OTHER TREATMENT GIVEN

	Number of cases known to have been dealt with
Pupils with minor ailments ...	10
Pupils who were admitted for convalescent treatment under School Health Service arrange- ments during 1961 ...	1
Pupils who received B.C.G. vaccination ...	317
Other than above— U.V.R. Treatment ...	25
Total ...	353

CONSULTANT E.N.T. SERVICE

No Consultant E.N.T. Clinic held during 1961

CONSULTANT ORTHOPAEDIC SERVICE

Consultant Clinic.

Number of sessions held during year 10

	Pre-school children	School children
No. of individual patients seen by Consultant, including those continuing attendance from previous year	2	3
No. of individual patients referred for opera- tive treatment as short-stay cases only ...	—	—
Recommended long-stay hospital school ...	—	—
Recommended treatment by orthopaedic nurse or physiotherapist:—		
(a) at treatment centres	—	—
(b) domiciliary	—	—
No. of children who obtained operative treat- ment during the year	—	—
Total number of attendances at consultant clinic	—	—
Treatment Centres		
No. of sessions held during year		
	Pre-school children	School children
Total number of patients treated (including cases continuing treatment from previous year)	—	—
Total number of attendances	—	—
Domiciliary Treatment		
Total number treated	—	—
Total number of visits to patients' homes ...	—	—
Appliances		
Number of appliances—(a) recommended ...	—	—
(b) obtained ...	—	—

PAEDIATRIC SERVICE

Consultant Clinics.

Number of sessions held during the year 9

	Pre-school children	School children
Number of individual patients seen :—		
(a) new cases	5	18
(b) cases attending from previous year(s)	10	27
Total number of attendances at clinics ...	24	75

PAEDIATRIC SERVICE

Summary of type of defect for which referred

Defect or Disease	Pre-School Children	School Children
Heart and Circulatory System ...	—	9
Respiratory System, including E.N.T. Defects	5	11
Orthopaedic	2	2
Skin	1	—
Mental Defect, including Educational Sub-normality	1	3
Congenital Deformities	—	1
Genito-urinary System	—	1
Glands	—	3
Nutritional	3	—
Developmental	3	9
Incontinence	—	5
Unclassified	—	1
Total	15	45

MEDICAL EXAMINATION OF ENTRANTS TO TRAINING COLLEGES

No. of examinations carried out during the year ... 26

CHILDREN AND YOUNG PERSONS ACT, 1933 EMPLOYMENT OF CHILDREN

Number of children examined during the year in
connection with applications:—

(a) for employment (including entertainments) 67

(b) No. of (a) found unfit —

ULTRA VIOLET LIGHT TREATMENT

No. of sessions held during the year	153	
No. of children treated during the year	Pre-School children	School children
	11	14
Total No. of attendances ...	193	161

SPEECH THERAPY

Total number of sessions held during the year ...	...	224
No. of new cases treated during the year	... ..	35
No. of cases already attending for treatment from previous year	... ..	34
Total number of cases treated	... ..	69
No. of cases awaiting treatment at end of the year	...	10
No. of visits made to schools	... ..	6
No. of home visits ...	... ..	—

Analysis of Cases treated during the year :—

	Boys	Girls
Stammering	3	1
Defects of articulation—		
(a) Dyslalia	25	10
(b) Sigmatism	7	2
(c) Rhinolalia, due to—		
(i) Cleft Palate	2	2
(ii) Nasal obstruction	—	—
(d) Dysarthria	1	—
Aphasia	—	—
Defective speech due to—		
(i) Educational sub-normality	6	2
(ii) Deafness	—	—
Retarded speech development	4	2
Dysphonia	2	—
Other defects—		
Rhotacism	—	—
Idioglossia	—	—
Total	50	19
Analysis of Cases discharged :—		
No. of children discharged during year—		
Speech normal	9	2
Speech improved	4	1
Unsuitable for treatment	2	—
Non-co-operation	5	3
Left school	—	—
Left district	6	1
Other reasons—		

VACCINATION AND IMMUNISATION

I am no believer in special campaigns to try to encourage parents to protect their children against the commoner epidemic infections. In my experience the family Doctor and the Health Visitor are the two most powerful weapons, and their advice and exhortations are the only factors likely to influence reluctant or neglectful parents. It is a sad fact that, should a case, for example, of poliomyelitis, occur in an unprotected child, the parent, who has previously "not believed in" Immunisation, immediately accepts it for the other children in her family, as do other parents in the neighbourhood who hitherto may have failed to take advantage of the protection offered by their doctors or ourselves. How tragic it is that crippling illness, which may even result in death, should be inflicted on the child as a result of parental ignorance, prejudice or apathy.

The Health Visiting staff in your area make every effort to bring home to parents the value of immunisation and I am glad to record the enthusiasm displayed by family doctors in this field of preventive medicine.

Since writing my last Report, oral vaccine against poliomyelitis has been introduced, and at the time of writing, is in almost universal use. It is possible that at some time in the near future a multiple vaccine may become available, giving protection against Diphtheria, Whooping Cough, Tetanus and Poliomyelitis. At the present time, protection is given against the first three diseases by injections and against Poliomyelitis by the swallowing of drops of vaccine on a lump of sugar or in syrup.

The numbers of children protected against Poliomyelitis have increased by some 300 over the numbers similarly protected in 1960. This is a matter of great satisfaction to me. I can assure you that every effort will be made to increase still further the percentage of children given protection.

There has been a slight decrease in the numbers of children who completed a full course of primary immunisation against Diphtheria. One feels that this is due, in part, to the continued absence of the disease from the community, with the consequent feeling of security thus

falsely engendered. I must state once again that although diphtheria is now a rare disease, this is only because of the fact that the vast bulk of the population have been protected against it. It would be most unfortunate if, as a result of apathy the percentage of children protected should fall, and it cannot be stressed too strongly that there would then be quite a risk of a return of Diphtheria in epidemic form.

Whooping Cough is rapidly becoming a rare disease and it is obvious that the freedom from infection enjoyed by immunised children is due to the protection given by this prophylaxis.

Smallpox vaccination in your area has been maintained at a reasonably satisfactory level. A recent much publicized opinion of a certain Scientist that vaccination in infancy is undesirable, cannot be accepted as valid for a number of reasons. The main one is that primary vaccination in infancy renders subsequent vaccination a much safer procedure and one unlikely to give rise to serious complications. Experience in the recent outbreak of Smallpox confirms that the more serious vaccinal reactions experienced in adults almost invariably occurred in those who had not been given primary vaccination in infancy. I still believe that the optimum time to vaccinate a child is during the first few months of life, and my own experience over years confirms my conviction that, properly carried out, primary vaccination in infancy carries virtually no risk at all. You will notice that the number of children vaccinated during 1961 is almost identical with the number thus protected in the previous year.

B.C.G. vaccination was continued and it is gratifying to record the high percentage of acceptance. As indicating the gradual disappearance of the tubercle bacillus from the community, it is interesting to note the increasing number of children who are found to be negative to the primary skin test. One can hope that tuberculosis can ultimately be stamped out in the community as a disease of epidemic or social significance.

VACCINATION AGAINST POLIOMYELITIS

Vaccination during 1961

CLASS	Number vaccinated with two injections during the year ended 31st December, 1961
Children born in the years 1943—1960	1,134
Young persons born in the years 1933—1942	304
Persons born before 1933 who have not passed their 40th birthday	992
Others	2
Total	2,432

Total number of persons who had received two injections at 31st December, 1961:—

Children	...	...	11,962
Others	...	...	5,938
Total	...	...	17,900

Number of persons who had received one injection only at 31st December, 1961:—

Children	...	...	130
Young Persons	...	...	26
26 — 40 years	...	...	101
Others	...	...	—
Total	...	...	257

Number of persons who had received three injections at 31st December, 1961 15,074

Number of children aged 5—12 who had received four injections at 31st December, 1961 ... 2,958

DIPHTHERIA IMMUNISATION

Immunisation carried out during the year

	1961	1960	Children born in years :—				1947-51	Total
			1959	1958	1957	1952-56		
No. of children who completed a full course of primary immunisation (including temporary residents) ...	303	364	49	22	23	188	67	1016
Total number of children who were given a secondary or re-inforcing injection (i.e. subsequent to complete full course) ...	—	—	—	2	22	541	212	777

Immunisation in relation to Child Population

Age at 31.12.61 i.e. Born in Year	Under 1 1961	1—4 1960-1957	5—9 1956-1952	10—14 1951-1947	under 15 Total
Last complete course of injections (whether primary or booster)					
1957—1961 ...	303	2221	2139	1596	6259
1956 or earlier	—	—	1013	2512	3525

No case of Diphtheria occurred in the Division during the year.

WHOOPIING COUGH IMMUNISATION

Immunisation carried out during the year

Age at Final injection	Number of children who completed a full course of immunisation including temporary residents)
Under 6 months	378
6 months to one year	281
1—2 years	53
2—3 years	22
3—4 years	16
Total ...	750

Immunisation in relation to Child Population

Age at 31.12.61 i.e. born in year :—	Under 1 1961	1 to 4 1960–1957	5 to 9 1956–1952	10 to 14 1951–1947	Under 15 Total
Number immunised ...	306	2,348	1,941	212	4,807

Whooping Cough notifications and Deaths in relation to Immunisation during the year

Age at date of notification	No. of cases notified	No. of cases included in preceding column in which child completed a full course of immunisation
Under 1	5	3
1	1	—
2	—	—
3	1	—
4	3	1
5 — 9	4	—
10 — 14	—	—
Totals ...	14	4

No death occurred from Whooping Cough in the Division during the year.

VACCINATION AGAINST SMALLPOX

Number of Persons vaccinated or re-vaccinated
during the year

Age at Date of Vaccination	Under 1	1 year	2 to 4	5 to 14	15 or over	Total
Number Vaccinated ...	252	70	21	16	25	384
Number Re-Vaccinated ...	—	1	3	—	33	37

IMMUNISATION AGAINST TETANUS

Immunisation carried out during the year

	Children born in years:—						
	1961	1960	1959	1958	1957	1952-56	1947-51
1. Number of children who completed a full course of primary immunisation (including temporary residents) ..	303	370	46	25	14	29	10
2. Total number of children who were given a secondary or re-inforcing injection (i.e., subsequent to complete full course) ..	—	—	—	—	—	—	—

B.C.G. VACCINATION OF 13-YEAR OLD SCHOOL CHILDREN

1. No. of medical officers (including Divisional Medical Officer) approved to undertake B.C.G. Vaccination	3
---	---

Acceptances

(a) No. of children offered tuberculin testing and vaccination if necessary, whether the offer was made during the year or previously ...	550
(b) No. of (a) found to have been vaccinated previously	—
(c) No. of acceptances	437
(d) Percentage of acceptances, i.e., (c) to (a) — (b) ...	79·45

Pre-Vaccination Tuberculin test

(a) No. of children tested	420
(b) Result of test—	
(i) Positive	52
(ii) Negative	355
(iii) Not ascertained	13
	—
	TOTAL 420
(c) Percentage positive	12·5

Vaccination

No. vaccinated	317
-----------------------	-----

Tuberculin test twelve months after vaccination

(a) No. vaccinated in 1960	—
(b) No. tuberculin tested after 12 months	—
(c) Result of test—	
(i) Positive	—
(ii) Negative	—
(iii) Not ascertained	—
	—
	TOTAL —

B.C.G. VACCINATION—CONTACT SCHEME

Details of B.C.G. Vaccination of Contacts during the year
1961

		AGE GROUPS												All ages
		Under 1 year Months				Years								
		0	1	3	6	1	2	3	4	5	10	15	20	
Vaccinated :—														
Male	...	3	3	2	1	1	3	—	1	2	1	—	—	17
Female	...	4	1	1	1	1	—	1	—	2	1	3	1	16
TOTAL	...	7	4	3	2	2	3	1	1	4	2	3	1	33
RESULT OF VACCINATION :—														
Successful														
Male	...	1	3	1	1	1	3	—	—	2	1	—	—	13
Female	...	4	1	1	1	1	—	—	—	2	1	2	1	14
TOTAL	...	5	4	2	2	2	3	—	—	4	2	2	1	27
Unsuccessful		...	—	—	—	—	—	—	—	—	—	—	—	—
Not finally ascertained		...	2	—	1	—	—	1	1	—	—	1	—	6

LOCAL HEALTH AUTHORITY CLINICS

At the time of writing, a new purpose-built prefabricated Clinic has been erected at Outwood. The Church Institute, although a haven of refuge when Rehoboth Chapel was no longer available, was far from satisfactory for our purpose. It was noisy, inconvenient and much too near the main road. The new clinic is a most excellent building and we are looking forward to a further expansion of Maternity and Child Welfare Services in the very near future. It is my intention still further to extend the scope of work undertaken in this Clinic. Health education and chiropody are two services which come readily to mind and it may well be that further uses can be found. It has been the experience throughout the County that the provision of a new Clinic has meant greatly increased attendances and an obvious increase in enthusiasm. I hope that this may prove to be so at Outwood.

The Stanley Clinic is little different from before and it doesn't seem possible to hope for any radical alteration. I shall continue to press for a Clinic in Stanley similar to the one I have just described in Outwood.

The Clinic at Wrenthorpe is reasonably well maintained and attended.

The Central Clinic at Rothwell continues to be used for such services as Ophthalmic and Consultant Paediatric, and is ideally suited for such purposes.

CONSULTANT CLINICS

There has been no change during 1961. Ophthalmic Clinics are held weekly but the work has again tended to build up, and it seems likely that during next year additional sessions may be necessary. It is thought that this is in no way due to a deterioration in the health of school children, but to more accurate and painstaking ascertainment by teachers and School Medical Officers of children thought to be suffering from defective eyesight.

The Paediatric Consultant, Dr. Pickup, still attends on the second Friday of each month. His services continue to be extensively used by ourselves and by local practitioners, and the value of his advice is greatly appreciated by all.

Ear, nose and throat treatment continues available as before at Leeds and at Wakefield, and cases considered to need special urgent attention are given individual appointments.

We share with a neighbouring Health Division the services of a Speech Therapist, and sessions are held on a weekly basis.

Some reduction in the delays experienced for Child Guidance Consultations has taken place during the year. The majority of our cases are referred to the Consultant Psychiatrist at Pontefract, and some few are seen at County Hall.

MENTAL HEALTH SERVICE

I am indebted to Mr. A. Emmerson, Senior Mental Welfare Officer, for the following notes on the Mental Health Service in your area. I feel that the service is settling down well and that a definite pattern is being established in the light of experience.

“In this field, emphasis is now placed on care at home and in the community, and admission to Psychiatric Hospitals tends to be confined to those patients requiring treatment, nursing, or observation, of a type which only such establishments can provide. The Mental Health Act, 1959, which came into operation on the 1st November, 1960, is a further step towards this idea.

It will be appreciated that to provide a community Mental Health Service in the fullest possible sense, places a heavy responsibility on the local authority and that the task is of such magnitude that its full accomplishment may take many years. It is obvious, therefore, that the new Act will have to be implemented by stages and much of our work during 1961 has been aimed at laying firm foundations on which a progressive service can be built.

The foremost requirements of the scheme may be summed up under three headings:—

- (1) The setting up of a domiciliary service to help all types of mentally disordered persons and their relatives, irrespective of whether they have been in hospital.
- (2) The development of training facilities for persons of all ages especially the subnormal.
- (3) The provision of residential accommodation.

The first of the above items is, in my opinion, of paramount importance and priority has been given to it. As already reported, two Mental Welfare Officers work almost full time in this Health Division. In addition to their statutory duties under the Act, these Officers also help and advise in the wide range of personal and social problems, usually working in close conjunction with the General Medical Practitioners and the Hospital Consultants. Their care and after-care case load of subnormal

and mentally ill patients has risen steadily and now totals over 160. If their work continues to increase it may be that the present establishment may have to be revised.

Some forms of mental disorder are inclined to lead to varying degrees of social isolation, and to help combat this, Psychiatric Social Clubs are being formed at various centres. Two such Clubs in adjoining districts have extended membership to suitable persons in your own area and this has been readily accepted. The Clubs in question, however, cater mainly for persons who have suffered from mental illness, and I am now considering the formation of a Club in the Rothwell area primarily for the benefit of the subnormal.

Arrangements for training facilities have to date been far from satisfactory in that 30 patients from this Division have had to attend Centres at Airedale, Leeds and Wakefield. It is with relief, therefore, that I am now able to report that consent has been received to the erection of a Centre in Holmsley Lane, Rothwell, which will provide between 47 and 50 places for subnormal children and adults. At the time of writing construction has begun but the premises are not expected to be completed until early in 1963.

With regard to item (3) listed above—the provision of residential accommodation—this calls for a very careful assessment of need, and I am at present carrying out a survey of requirements in this Division.

What has been achieved during the year has been possible only through co-ordination of effort and understanding of mutual problems, and I would like to express my appreciation to the General Medical Practitioners and to the Consultants at Stanley Royd Hospital for their whole-hearted support.”

DOMICILIARY NURSING SERVICES

Health Visiting.—The absence of two Assistant Health Visitors who have taken up training has resulted in some over-all difficulty of staffing, but their places have been partially filled by a newly-appointed Assistant Health Visitor who herself is expected to take up training for her full Health Visitor's qualification in 1962. Whilst the main pre-occupation of Health Visitors is still the care of mothers and young children, an increasing proportion of their time is being taken up in caring for aged persons, particularly those living alone.

There is no evidence that an increased establishment is needed at the present time, and considerable credence can be given to the view that the standards of mothercraft and of domiciliary child care are steadily rising, and few cases of deliberate neglect or of maternal ignorance now occur.

Home Nursing.—We have continued fully staffed in this Department, and reports from the Supervisory Nurses confirm that the work carried out by Home Nurses in your area is of the highest quality.

Midwifery Service.—We have had our troubles during the year owing to illness, and resignations, but we have managed to keep going and at the time of writing are reasonably fully staffed. In this we are fortunate, as there is an over-all shortage of midwives both in Hospitals and in the Local Health Authority Service. There is an increasing emphasis on early discharge from Maternity Hospitals, and this has increased the volume of nursing which has had to be undertaken. There is no evidence, however, that any of the midwives are in any way over-worked, and our chief difficulty is maintaining adequate coverage since the introduction of six weeks annual leave recently authorised by Whitley Council.

I am happy to say that in all branches of domiciliary nursing, the relationships of the nursing staff with the general practitioners has remained excellent and no single complaint has been received from any source during the year.

HOME HELP SERVICE

The administration of this Service becomes more and more complicated. At the end of 1961 no fewer than 81 Part-time Domestic Helps were employed in the Health Division. It can readily be understood that there are enormous numbers of resignations and of new appointments. Add to this the complexity of ensuring that adequate but not excessive help is given to any individual case, the personal preferences of those receiving help for individual Home Helps, the occasional aversion of the latter to individual householders, and you will appreciate the jigsaw nature of the necessary administration. We have done our best during the year to ensure a fair distribution, to avoid abuse, and to try to meet the individual wishes of recipients and Helps.

The increased allocation authorised by the County Council has been utilised almost to the full, with a small reserve maintained for possible emergencies, or the outbreak of epidemics.

There is no doubt that this Service has come to stay and is proving of the greatest help in maintaining at home old people who otherwise would be driven to seek institutional accommodation.

DOMESTIC HELPS

Authorised Divisional Allocation.

(i)	Basic	...	...	...	32 $\frac{1}{4}$
(ii)	From Reserve Pool (Average over the year)	...	...	...	$\frac{1}{2}$
	Total	...	...	...	<u>32$\frac{3}{4}$</u>

Number of Domestic Helps employed at 31st December, 1961—

(i)	Whole-time	...	...	—
(ii)	Part-time	...	...	81
	Total	...	...	<u>81</u>

Cases provided with Domestic Help during year ended 31st December, 1961—

	No. of Cases	Hours employed
(i) Maternity (including expectant mothers)	21	1,606
(ii) Tuberculosis	2	428
(iii) Chronic sick (a) aged 65 + ...	340	56,789
(b) under 65 ...	22	5,026 $\frac{1}{2}$
(iv) Others	8	1,054 $\frac{1}{2}$
Totals ...	393	64,904

Employment:—

Total No. of hours of all home helps employed between 1st Jan. and 31st Dec., 1961 \div 2288 (52 weeks \times 44 hours) = No. of home helps that could have been employed full time. = 29.72

CHIROPODY SERVICE

This is now fully in being and on the whole can be considered to be working satisfactorily. The "indirect" service is still the one which we use, and in the majority of areas sessions are held in rented premises. Normally, 6 treatments per patient per year are given but more frequent treatments are sanctioned if requested on special grounds.

I hope that it may be possible to use the new Child Welfare Clinic at Outwood for chiropody sessions.

Some concern is being felt at the increasing percentage of patients who ask to be given domiciliary treatment at an enhanced fee. It is necessary to strike a fair balance between undue hardship and exploitation, and some concern is being expressed by the County Council at the increasing percentage of those representing themselves as being unable to attend the normal chiropody sessions. The matter is to be given central consideration and an over-all County standard laid down.

There is no doubt that the Chiropody Service is a valuable one and all concerned with the care of old people have been advocating the establishment of such a Service for some years past.

Our own responsibility is to see that the scheme works smoothly and fairly and that no one in real need is deprived of necessary help.

The following table will give you some idea of the amount of work undertaken during the year.

CHIROPODY SERVICE

Number of sessions held during the year

(a)	In Voluntary Clinics	...	...	321
(b)	In Chiropodist's Surgery	...	...	118
	Total	...	...	<u>439</u>

Number of patients treated

(a)	In Voluntary Clinics	...	...	723
(b)	In Chiropodist's Surgery	...	...	225
(c)	In own homes	...	...	178
	Total	...	...	<u>1,126</u>

Number of Treatments given

(a)	In Voluntary Clinics	...	...	2,776
(b)	In Chiropodist's Surgery	...	...	927
(c)	In own homes	...	...	664
	Total	...	...	<u>4,367</u>

AMBULANCE SERVICE

This continued to display its expected high level of courtesy and reliability. No request was made in vain and the most cordial relationships existed throughout the year between ourselves and the ambulance staffs. I am inclined to think that this tends, at times, to be rather taken for granted. This is one of the unfortunate side effects of such a uniformly reliable service. It is difficult to imagine any improvement.

LABORATORY FACILITIES

The Medical Research Laboratory at Wakefield continues to undertake the bulk of our Laboratory investigations and have, as usual, been uniformly helpful throughout the year. Blood samples are sent to the Laboratory at Seacroft, and I would like to acknowledge the meticulous care with which reports are relayed and queries answered.

MILK AND FOOD SAMPLES

There has been no change during the year. Samples of foodstuffs are forwarded to the County Analyst at Wakefield and analyses of milk and water samples are obtained from the Analyst at Halifax.

HOSPITAL PROVISION IN THE AREA

Maternity Hospitals.—Unexpectedly the staffing position improved during 1961 and as a result we were able to regain our former allocation of beds for mothers requiring Hospital accommodation on social or domestic grounds. The present-day practice of earlier discharge during the lying-in period has been continued, although not nearly so drastically as was expected. Every effort is made to ensure that mothers are discharged home only where domestic circumstances make lying-in at home possible.

I would like to pay tribute here to the consideration which has been given to our needs both by the Wakefield Group of Maternity Hospitals, and by our neighbours in the Morley Health Division. They have been kind enough to allow us to use a small number of their own beds and this concession has been greatly valued and used to the full. In addition, we occasionally manage to get a really urgent last minute case to Staincliffe General Hospital, Dewsbury. Although this involves a longish journey, the overwhelming and urgent need of the mother is an overriding factor.

Cases with obstetric abnormalities are, of course, admitted without hesitation.

During 1961, rather over 50 per cent. of all births took place in Maternity Homes or Hospitals. This maintains our average of some years standing.

Infectious Diseases Hospitals.—The number of cases admitted to Infectious Diseases Hospitals during 1961 was 12, as against 7 in the previous year. Of these, it will be noted that no fewer than 7 were admitted for “observation” with illness of obscure causation.

No praise is too high for the standard of care given in Seacroft. Snapethorpe still remains available and here again the standard of care is of the highest.

I would like to acknowledge gratefully the prompt and accurate information always made available to us from both these Hospitals, for admission, discharge and amended diagnoses.

General Hospitals.—The position in your area is generally satisfactory. No report has come to hand of any difficulties experienced in finding accommodation for acute medical or surgical conditions, and the standard of treatment remains of the very highest quality.

Chronic Sick Hospitals.—There has been no improvement in the provision for elderly chronic sick. It is

disquieting to learn that in the proposed ten-year Hospital programme, a reduction of beds provided for geriatric cases is envisaged. This appears to be based on Nation-wide statistical evidence, but I can say without hesitation that there exists in this area chronic difficulty of accommodation and, in my opinion, a reduction in the number available beds in this region would be deplorable, and would lead to hardship.

A number of cases of a long-stay type have been transferred to St. George's to facilitate visits from relatives and friends. This is much appreciated and tends to make the lot of the unfortunate bedfast patient a more tolerable one. All new admissions from your area are taken into Headlands Hospital at Pontefract, this being a regional allocation. St. James' Hospital, Leeds, is limited in its intake to persons normally resident in that city.

The standard of treatment in all the above Hospitals is of the highest and from personal observation I can assure you that patients are treated with the greatest sympathy and kindness by all the staffs.

Welfare Accommodation.—This also remains difficult, but cases in urgent need are given every consideration by the County Welfare Officer and his staff. I should like to take this opportunity of paying tribute to the friendliness and co-operation which we invariably receive, and to the understanding manner in which sudden emergencies are dealt with.

I still feel that there is an unfortunate gap in the provision of accommodation for patients with chronic disabilities who are not considered to need Hospital care, but who have the greatest difficulty in maintaining themselves in reasonable comfort and dignity at home. Efforts are being made to close this gap and any further provision will be greatly welcomed. The type of establishment which I envisage is one in which some nursing attention could be given, to which regular visits were paid by a local general practitioner, and in which some assistance could be given in dressing, washing etc., etc. If, as I have already said, the proposed reduction of geriatric beds from the existing 1.7 per 1,000 to an intended 1.4 per 1,000 is implemented, a very heavy burden will be thrown on the domiciliary services, including Home Nurses and Home Helps.

The Local Health Authority have already got this matter under consideration and I hope it will be treated as a matter of some urgency.

PREVALENCE AND CONTROL OF INFECTIOUS DISEASE

The pattern of recent years was followed almost exactly, as a glance at the table will show. The expected biennial Measles epidemic developed and gave rise to a total notification of 242 cases. There was no report of any complication, and Measles, with the available care and drugs now in universal use, no longer presents the severe complications which were so dreaded years ago. It will be noted that, of the 242 cases, only 2 needed to be admitted to Hospital.

Of the 284 cases of Infectious Disease notified, only 12 were admitted to Hospital and of these, no fewer than 7 were admitted for observation.

The 10 deaths from Pneumonia were predominantly terminal conditions.

Only 1 case of acute Poliomyelitis was notified.

The most striking fact in the epidemiological position in 1961 is the entire absence of Whooping Cough from the community. It is unreasonable to expect that Whooping Cough will disappear entirely, but it is possible now to undertake a sober appraisal of the cumulative effects of several years immunisation. With a large percentage of children protected against this disease, it is reasonable to suppose that we have moved into an era when no longer will Whooping Cough be of epidemic significance. Sporadic cases must occur from time to time, but I think it entirely reasonable to express the belief that one more victory has been gained for preventive medicine.

Scarlet Fever gave rise to 30 notifications but continues mild and rarely gives rise to more than transitory illness. Only one case was admitted to Hospital and this was on social, rather than on medical, grounds.

The over-all picture is a remarkably good one, and I cannot remember a year when fewer cases of serious Infectious Disease occurred in your District.

Venereal Disease.—Regular Quarterly Reports are received and these indicate that there has been no increase in your area during the year, contrary to the National experience.

Infestations.—These continue at a very low level, and only very occasionally was it necessary to take action regarding dirty heads in schools.

No case of Scabies came to notice and there is no evidence that any exists.

INFECTIOUS DISEASES NOTIFIED DURING THE YEAR 1961

Disease	Total all ages			Age distribution, 1961												Cases sent to Hospital, 1961	Deaths, 1961		
	1959	1960	1961	0 — 1 year	1 — 2 years	2 — 3 years	3 — 4 years	4 — 5 years	5 — 10 years	10 — 15 years	15 — 20 years	20 — 35 years	35 — 45 years	45 — 65 years	Over 65 years			Age unknown	
Acute Poliomyelitis	1	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...
Scarlet Fever	30	...	...	...	3	7	14	4	1	1	...	...	...	...	...	1	...
Pneumonia	4	...	...	...	...	...	2	...	...	...	...	2	...	...	...	1	10
Puerperal Pyrexia
Acute Anterior Encephalitis
Erysipelas
Whooping Cough
Measles	242	4	17	21	29	49	109	10	...	1	...	...	...	2	...	...	...
Sonnè Dysentery
Food Poisoning
Observation	7	4	1	2	...	...	...	...	...	...	...	...	...	...	7	...	...
Totals	136	124	284	8	18	24	32	56	125	14	1	2	...	2	...	2	...	12	10

TUBERCULOSIS

The progress of recent years has been maintained. For the last 8 or 9 years, that is ever since the introduction of the new regime in treatment, there has been a continuing fall in the incidence, severity and mortality of tuberculosis. I have in previous reports enumerated the relevant factors, but would like to point to this year's figures as being continuing confirmation.

No death was attributed to Pulmonary Tuberculosis during 1961, but one was debited to Non-Pulmonary. I stand by my belief that tuberculosis is on its way out as a major factor and that the new drugs available, together with the high standard of nutrition and environmental hygiene enjoyed by all the population, will ensure its ultimate disappearance as an epidemic disease.

Chest Physicians in the region have had consultations with ourselves and we are in agreement as to additional measures to be introduced to eliminate and control the few remaining sources of infection. All these will be vigorously pursued and further reductions in incidence are anticipated.

The B.C.G. vaccination scheme has been continued and there is every reason to believe that it is making a valuable contribution in reducing the severe type of adolescent tubercle which in olden days was so frequently and rapidly fatal. Cases admitted to Hospital are now kept there for a much shorter period than was the case before the introduction of the newer anti-biotic drugs.

Continued improvement in housing and diminution of overcrowding have played their part, and only rarely has it been necessary to approach you for priority re-housing on the grounds that the applicant is suffering from tuberculosis. I would like to record my appreciation of the way in which you have received these fortunately infrequent requests.

The clinical standards attained by the Chest Clinics in Leeds and Wakefield and at the Chest Hospitals have remained of the highest. There has been full and free inter-change of helpful information and my thanks are due for the courtesy of the Chest Physicians and their staffs, both nursing and administrative.

TUBERCULOSIS

Record of Cases during the year 1961

	Pulmonary		Non-Pulmonary	
	M	F	M	F
No. of cases on Register at beginning of year	21	23	4	3
No. of cases notified for first time during year	—	2	—	—
No. of cases restored to Register ...	—	—	—	—
No. of cases added to Register otherwise than by notification ...	2	—	—	—
No. removed to other districts ...	1	—	—	—
No. of cases Recovered ...	2	4	—	—
No. died from the Disease ...	—	—	—	1
No. died from other causes ...	—	—	1	—
No. Removed from Register :— Revised diagnosis ...	—	—	—	—
No. of cases on Register at end of year ...	20	21	3	2

New Cases and Mortality during 1961

Age Periods		New Cases				Deaths			
		Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
		M	F	M	F	M	F	M	F
0—1 year	...	—	—	—	—	—	—	—	—
1—5 years	...	—	—	—	—	—	—	—	—
5—10 "	...	—	—	—	—	—	—	—	—
10—15 "	...	—	—	—	—	—	—	—	—
15—20 "	...	—	1	—	—	—	—	—	—
20—25 "	...	—	—	—	—	—	—	—	—
25—35 "	...	—	1	—	—	—	—	—	—
35—45 "	...	—	—	—	—	—	—	—	—
45—55 "	...	—	—	—	—	—	—	—	1
55—65 "	...	—	—	—	—	—	—	—	—
Over 65 years	...	—	—	—	—	—	—	—	—
Age unknown	...	—	—	—	—	—	—	—	—
Totals	...	—	2	—	—	—	—	—	1

TUBERCULOSIS

New Cases and Deaths since 1942

Year			New Cases		Deaths	
			Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary
1942	...	...	18	4	10	2
1943	...	...	21	3	9	—
1944	...	...	7	3	5	1
1945	...	...	10	7	2	2
1946	...	...	9	8	5	1
1947	...	...	12	2	4	1
1948	...	...	8	3	4	1
1949	...	...	17	4	4	—
1950	...	...	11	6	2	1
1951	...	...	8	—	1	—
1952	...	...	10	—	2	—
1953	...	...	11	—	1	—
1954	...	...	9	—	4	—
1955	...	...	6	—	1	—
1956	...	...	4	—	1	—
1957	...	...	4	—	—	1
1958	...	...	3	1	1	—
1959	...	...	7	1	2	—
1960	...	...	3	1	1	—
1961	...	...	2	—	—	1

HOUSING

As usual, Mr. Walker has dealt very fully with this in his Report which is published herewith. It is perhaps a little paradoxical to note that during 1961 no fewer than 143 houses were built by private enterprise as against 40 by the Local Authority. The reasons for this are complex but are largely conditioned by the difficulty which Local Authorities experience in purchasing land for building. They are bound by the price agreed by the District Valuer and lack the freedom of negotiation enjoyed by the private builder in acquiring sites. I am assured, however, that considerable new schemes are on the point of being begun and that there will, in the very near future, be a resurgence of Local Authority building.

One must express regret that there are still a considerable number of tenants of houses either "individually unfit" or living in Clearance Areas, who are still awaiting re-housing. I realise that there are many factors operating but these are of little account to the unfortunate person who is condemned, usually through no fault of his own, to continue to live, frequently with young children, in houses which, by any standards, are totally unfit and on which repairs can no longer be enforced.

It is my duty to point out these facts, although I do so with a complete knowledge of the difficulties which your Authority have to overcome.

HOUSING STATISTICS, 1961

1.	No. of Dwelling Houses in District	...	...	5,768
2.	No. of Houses included in above:—			
	(a) Back-to-back	...	...	168
	(b) Single back	...	...	22
3.	HOUSES IN CLEARANCE AREAS AND UNFIT HOUSES ELSEWHERE			
	No. of houses included in Representations made during the year			
	(a) in Clearance Areas	...	...	40
	(b) Individual unfit houses	...	...	12

A. HOUSES DEMOLISHED

	HOUSES DEMOL- ISHED	DISPLACED during year	
		Persons	Families
In Clearance Areas			
(1) Houses unfit for human habitation	4	16	4
(2) Houses included by reason of bad arrangement, etc. ...	—	—	—
(3) Houses on land acquired under Section 43 (2) Housing Act, 1957	—	—	—
Not in Clearance Areas			
(4) As a result of formal or informal procedure under Section 17 (1) Housing Act, 1957	33	89	33
(5) Local Authority owned houses certified unfit by the Medical Officer of Health	—	—	—
(6) Houses unfit for human habitation where action has been taken under local Acts ...	—	—	—
(7) Unfit houses included in Unfitness Orders	—	—	—
B. UNFIT HOUSES CLOSED		Number	
(8) Under Sections 16 (4), 18 (1) and 35 (1), Housing Act, 1957	1	3	1
(9) Under Sections 17 (3) and 26, Housing Act, 1957	—	—	—
(10) Parts of buildings closed under Section 18, Housing Act, 1957	—	—	—

C. UNFIT HOUSES MADE FIT AND HOUSES IN WHICH DEFECTS WERE REMEDIED

	By Owner	By Local Authority
(11) After informal action by local authority	92	—
(12) After formal notice under		
(a) Public Health Acts ...	—	—
(b) Sections 9 and 16, Housing Act, 1957 ...	1	—
(13) Under Section 24, Housing Act, 1957	—	—

D. UNFIT HOUSES IN TEMPORARY USE (Housing Act, 1957)

	Number of Houses	Number of separate dwellings contained in column (1)
	(1)	(2)
Position at end of year		
(14) Retained for temporary accommodation		
(a) Under Section 48 ...	—	—
(b) Under Section 17 (2) ...	—	—
(c) Under Section 46 ...	—	—
(15) Licensed for temporary occupation under Sections 34 or 53	—	—

E. PURCHASE OF HOUSES BY AGREEMENT

	Number of Houses	Number of occupants of houses in column (1)
	(1)	(2)
(16) Houses in Clearance Areas other than those included in confirmed Clearance Orders or Compulsory Purchase Orders, purchased in the year	—	—

4. No. of families rehoused during the year into Council owned dwellings

(a) Clearance Areas, etc.	38
(b) Overcrowding	15

5. RENT ACT, 1957

- (a) No. of certificates of disrepair granted ... 3
 (b) No. of undertakings to execute repairs
 given by owners to the local authority ... Nil
 (c) No. of certificates of disrepair cancelled ... Nil

6. OVERCROWDING

—Little Statutory overcrowding. Overcrowding
 mainly due to lodgers.

7. NEW DWELLINGS

No. of new dwellings completed during the year:—

By the Local Authority	...	...	...	40
By Private Enterprise	...	...	...	143

8. GRANTS FOR CONVERSION OR IMPROVEMENT OF HOUSING ACCOMMODATION

	Formal applica- tions received during the year	Applica- tions approved during the year	Number of dwellings completed during year
	Number of dwellings	Number of dwellings	
(a) CONVERSIONS (The number of dwellings is the number resulting from completion of the work)	—	—	—
(b) IMPROVEMENTS	37	36	40

9. DETAILS OF ADVANCES FOR THE PURPOSE OF ACQUIRING OR CONSTRUCTING HOUSES

20 Applications for loans under Small Dwellings
 Acquisition Act, all granted.

SANITARY CIRCUMSTANCES OF THE AREA

Water Supply.—As from the 1st October, 1961, the supply and distribution of water was taken over by the Wakefield and District Water Board. The supply has been satisfactory. The total consumption in the district, up to the 30th September, 1961, was 133,937,000 gallons. Of this quantity 15,865,000 gallons were used for trade purposes and 118,072,000 were accounted for by domestic purposes and leakages respectively.

The average daily consumption per head for domestic purposes was 29.79 gallons, and for trade purposes 4.55 gallons.

There is no well and no standpipe in the district. The water is without plumbo-solvent action.

One sample was taken during the year and below is a copy of the chemical analysis:—

Total solids	...	...	...	130
Free Ammonia	...	...	...	0.02
Mineral matter	...	...	...	100
Chlorides as Na Cl	...	...	...	24
Albuminoid Ammonia	...	...	...	0.06
Oxygen absorbed in 4 hours at 80° C.				0.15
Nitrous Nitrogen	...	...	...	Nil
Nitric Nitrogen	...	...	...	0.5
Total Hardness	...	...	...	54
Permanent Hardness	...	...	...	36
Temporary Hardness	...	...	...	18
Acidity CaO	...	...	...	Nil
Alkalinity in terms of CaCO ₃	...	...	...	18
pH Value	...	...	...	7.7
Colour—Hazel Units	...	...	...	Nil
Turbidity—Silica Scale	...	...	...	Nil
Manganese as Mn	...	...	...	Nil
Iron as Fe	...	...	...	0.03
Lead in Solution	...	...	...	Nil
Lead dissolved in 24 hours	...	...	...	Nil
Free Chlorine—actual free	...	...	...	0.06
Total including chloramines	...	...	...	0.10

Sewage Disposal.—There has been no major change during the year. Results and Effluents are satisfactory.

Drains and Sewers.—No major schemes have been completed during the year.

Closet Accommodation.—See Report of the Public Health Inspector.

Public Cleansing.—A full report of the Cleansing Service will be found in the Report of the Senior Sanitary Inspector.

Rivers and Streams.—No action was necessary during the year.

Shops and Offices.—No complaint was received and no action has been necessary during the year in respect of any premises.

Camping Sites.—There is no official camping site in the area and action is taken as necessary in respect of the one or two places in the district to which caravan dwellers still resort from time to time.

Swimming Baths and Pools.—No public baths in this area.

Disinfestation.—Nothing of note has come to light during the year and there is no reason to believe that any significant degree of infestation exists.

Smoke Abatement.—This is fully dealt with in the Report of the Senior Public Health Inspector, as are Colliery Spoil Heaps and Offensive Trades.

Factories and Workshops.—Parts 1 and 8 of the Act fall within the scope of administration of this Authority. Appended is a list of Outworkers and it will be noted that no special action has been necessary throughout the year. Routine inspections have been carried out in respect of Part 1 of the Act and again no special action has been necessary.

CASES IN WHICH DEFECTS WERE FOUND
(If defects are discovered on two, three or more separate occasions, they should be reckoned as two, three or more cases).

				No. of cases in which defects were found				Number of cases in which Prosecutions were instituted
				Found	Remedied	Referred :		
						to H.M. Inspector	by H.M. Inspector	
Want of cleanliness	..	..	—	—	—	—	—
Overcrowding	..	..	—	—	—	—	—
Unreasonable temperature	..	..	—	—	—	—	—
Inadequate ventilation	..	..	—	—	—	—	—
Ineffective drainage of floors		..	—	—	—	—	—	
Sanitary Conveniences :—								
Insufficient	..	..	—	—	—	—	—
Not separate for sexes	..	..	4	4	—	2	—
Unsuitable or defective	..	..	—	—	—	—	—
Other offences against the Act (not including offences relating to Outwork)		..	—	—	—	—	—	
Total	..	..	4	4	—	2	—

OUTWORK.

Nature of Work	No. of Out-workers in August list required by Sec. 110 (1)	Section 110			Section 111	
		No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in un-wholesome premises	Notices Served	Prosecutions
WEARING APPAREL :—						
Making, etc. ..	—	—	—	—	—	—
Cleaning and washing ..	—	—	—	—	—	—
Textile Weaving ..	—	—	—	—	—	—
TOTAL ..	—	—	—	—	—	—

FACTORIES ACTS, 1937 to 1959
INSPECTION FOR PURPOSES OF PROVISIONS AS TO
HEALTH.

(Including Inspections made by Public Health Inspector).

	No. on Register	Number of:—		
		Inspections	Written Notices	Occupiers prosecuted
1. Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	13	16	—	—
2. Factories not included in (1) in which Section 7 is enforced by the Local Authority	30	56	4	—
3. Other Premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises) ..	4	37	—	—
TOTAL	47	109	4	—

SANITARY INSPECTION OF THE AREA

Milk and Dairies

Milk samples taken	20
--------------------	-----	-----	-----	-----	----

Food and Drugs Inspections

Meat Inspections	...	...	...	...	1,086
Bakehouses	...	...	...	...	36
Food Inspections	...	...	...	...	350
Ice Cream Sampling	...	...	...	...	12
Fish Shop Inspections	...	...	...	...	40
Water Sampling	...	...	...	...	1

Housing

Houses inspected and recorded	...	...	...	...	286
General surveys	...	...	...	...	38
Public Health Act Inspections	...	...	...	...	130
Re-visits	...	...	...	...	160

Offensive Trades

Inspections of Knackers Yards	15
-------------------------------	-----	-----	-----	-----	----

Sanitary Matters.

Inspection of Verminous premises	...	...	...	...	16
Inspection for Rat and Mice infestation	...	...	...	...	115
Smoke Observations	...	...	...	...	42
Inspection re Refuse Removal and Disposal...	...	...	...	...	480
Factories and Workshops	...	...	...	...	109
Tents, Vans and Sheds	...	...	...	...	20
Inspection for Nuisances	...	...	...	...	360
Council house inspections and repairs	...	...	...	...	2,640
Miscellaneous	...	...	...	...	196

ANNUAL REPORT

of the

PUBLIC HEALTH INSPECTOR AND
CLEANSING SUPERINTENDENT

(D. WALKER, Ass. R.S.H., M.A.P.H.I.)

for the year

1961

To the Chairman and Members of the
STANLEY URBAN DISTRICT COUNCIL

Gentlemen,

I beg to submit this my eleventh report upon the work done by your Health Department.

Many of the records of inspections and statistical data are to be found in the Report of the Medical Officer of Health. Shortage of building labour in all the trades, continues to make the carrying out of repair work to the older type properties more difficult and a costly proposition although the building of new houses appears to be continuing and indeed still increasing, with no labour difficulties. This is apparently due to the fact that quite a large number of the new houses are being built by outside contractors who bring their own tradesmen, and the better wages being paid contracting on this type of work.

The Council's Slum Clearance programme and the Rent Act, 1957, the provisions of which now appear to have ceased to be applied have resulted in some 350 old houses being condemned and cleared and a fairly large number of better type houses being repaired. These two factors have resulted in a great reduction in the number of housing repair complaints received by the department and in most instances the complaints received refer to properties scheduled for dealing with as Slum Clearance property during the next five years. The biggest difficulty is in getting repairs carried out even of an essential character during the period which must elapse between condemnation of a house and the rehousing of the tenant which in some instances is a fairly long time.

The Council's suggested five years' Slum Clearance schemes for 1955-60 have been completed although all the tenants of these houses have not yet been rehoused. The Council have suggested to the Ministry of Housing and Local Government that during the next five years 1961-1966 a further 352 houses should be dealt with as Slum Clearance property. The tenants of the houses condemned under the earlier schemes should be rehoused when the Council's 1961 building programme is completed.

Improvement grants which have increased with the introduction of the statutory grant arrangement, as in past years, have been limited chiefly to owner occupiers and only in isolated instances have rented properties been improved. This is a most unsatisfactory thing and it would appear that before any considerable number of improvements are to be made to rented properties it will be necessary for statutory compulsion to be applied to owners.

Houses for letting in the area, other than Council houses, have been very small in number as practically all vacant property is being sold at enhanced prices although in some cases the houses concerned have been included for fairly early consideration in the Council's proposed Slum Clearance programme.

During the year 20 two bedroomed houses and 20 single bedroomed bungalows were completed by the Council, these being on the Church Lane estate, Outwood, and the Moor House and Bottom Boat Road estates, Stanley.

At the end of 1961 there were 312 applicants for Council houses and 149 for bungalows or single bedroomed flats.

Meat inspection work has again continued on a heavy scale and so far as is known all meat killed in the district is inspected and 93% is marked under the meat marking regulations.

I should like to express my appreciation to the Chairman and Members of the Council for the encouragement and consideration they have given me during the past twelve months.

ABATEMENT OF NUISANCES

Number of Privies converted into W.C's	...	...	9
„ „ Pail closets converted to W.C's	...	...	7
„ „ W.C's provided	...	...	21
„ „ Choked drains and W.C's cleared	...	...	119
„ „ Sink wastes repaired	...	...	9
„ „ Defective drain repairs	...	...	18
„ „ Water closets repaired	...	...	9
„ „ Inspection chambers repaired	...	..	1
„ „ Eavesgutters/downspouts repaired	...	...	17
„ „ House roofs and damp walls repaired	...	...	56
„ „ Flooded cellars	...	...	20
„ „ Damp houses remedied	...	...	83
„ „ House floors repaired	...	...	28
„ „ Walls replastered	...	...	30
„ „ New sinks fixed	...	...	1
„ „ Windows re-corded and repaired	...	...	30
„ „ Fireplaces repaired	...	...	5
„ „ Defective dustbins removed	...	...	297
„ „ Verminous premises	...	...	16
„ „ Dirty premises	...	...	12
„ „ Beetle infested premises	...	...	22
„ „ Rat infested premises	...	...	115
„ „ Burst services	...	...	4
„ „ W.C. Soil pipes repaired	...	...	9
„ „ Doors repaired/renewed	...	...	20
„ „ Cooking ranges repaired	...	...	5
„ „ Defective chimneys	...	...	2
„ „ Insanitary yards	...	...	3
„ „ Accumulations of refuse	...	...	2
„ „ Dangerous buildings	...	...	12

MEAT AND FOOD INSPECTION

Meat inspection has again taken up a great deal of time during the year and slaughtering has continued on a scale similar to last year. The actual number of animals slaughtered was 611 less than last year and the Ministry of Agriculture, Fisheries and Food grant for excessive meat inspection realized £248, as against £295 for 1960.

Meat marking has continued during the year at the bacon factory and continues to work satisfactorily. During this time 25,069 carcasses were inspected and marked by the Inspector on duty and this represents approximately 93% of the meat slaughtered in the district, and is most satisfactory.

The slaughterhouse premises are in very good condition and having been brought up to the standard required by the Slaughterhouse Act, 1958 leave little to be desired from the Public Health point of view. The construction of proper cooling hall and installation of stunning pen in the beast slaughter hall have greatly improved the premises which have been re-licensed under the Slaughterhouse Act, 1958.

The Ministry of Agriculture, Fisheries and Food fixed the Appointed day under the Slaughterhouse Act, as January 31st, 1962. Four licences were extended from October 31st, 1961, when they expired, up to this appointed day and it is anticipated that all four of the slaughterhouses will be brought up to the required standard for re-issue of the licence after this date.

Bovine tuberculosis appears to have been almost completely eradicated from the dairy and stock herds by the Ministry of Agriculture, Fisheries and Food scheme of attested herds and slaughtering of re-acting cattle. This is reflected in the small amount of meat which has been condemned for this disease during the year and the condemnations for bovine tuberculosis are now negligible. Only one case of cysticercus bovis was found during the year.

The Public Health Laboratory staff, as in past years, have been most helpful and have examined and advised upon any specimens of a doubtful character which have been taken to the laboratory at various times.

Details of visits, animals slaughtered and condemnations made are shown below:—

Total visits	...	...	1,086	Cows inspected	...	1,037	
				Cattle	,,	...	462
Carcases marked (Public				Calves	,,	...	12
Health) Meat Reg.	25,069			Pigs	,,	...	22,858
				Sheep	,,	...	2,396

Condemnations:

1 Cow Carcase & all Organs	601 lbs.	Tuberculosis
1 Bull , , , ,	504 lbs.	Acute Septic Peritonitis
4 Cow Carcases , , ,	1449 lbs.	Oedema, generalised
1 Cow Carcase , , ,	500 lbs.	Extensive and severe bruising
1 Cow Hindquarter	...	77 lbs. Abscesses
Beef Trimmings	...	43 lbs. Bruising
Bovine Heads & Tongues	...	6 Abscesses
, , , ,	...	2 Actinobacillosis
, , , ,	...	1 Cysticercus Bovis
, , Livers	...	23 Abscesses
, ,	...	13 Angioma
, ,	...	14 Distomatosis
, ,	...	9 Cirrhosis
, ,	...	1 Peritonitis
, , Lungs	...	1 Tuberculosis
, ,	...	4 Abscesses
, ,	...	1 Cysts
, ,	...	2 Pleurisy
, , Hearts	...	1 Pericarditis
, , Mesenteric Fats	...	1 Pentastomes
, , Kidneys	...	3 Nephritis
, ,	...	3 Cysts
, , Kidney Fat	...	1 Oedema
, , Stomachs	...	1 Peritonitis
Cow Udders	...	8 Mastitis
2 Sheep Carcases & all Organs	...	46 lbs. Emaciation
1 Sheep Carcase & all Organs	...	40 lbs. Moribund

1	Leg of Lamb	...	...	6 lbs.	Abscesses
	Sheep Livers	...	...	7	Distomatosis
	„ „	...	...	1	Cysts
	„ Lungs	...	...	1	Strongyles
7	Pig Carcases & all Organs			360 lbs.	Extensive and severe bruising
16	„ „ „ „ „			623 lbs.	Emaciation
1	„ „ „ „ „			63 lbs.	Jaundice
7	„ „ „ „ „			621 lbs.	Moribund
5	„ „ „ „ „			361 lbs.	Oedema, generalised
7	„ „ „ „ „			598 lbs.	Acute Septic peritonitis
2	„ „ „ „ „			143 lbs.	Acute septic pneumonia
15	„ „ „ „ „			1463 lbs.	Pyæmia
1	„ „ „ „ „			98 lbs.	Swine erysipelas, acute
39	„ „ „ „ „			2211 lbs.	Swine Fever
1	„ „ „ „ „			157 lbs.	Multiple tumours
4	„ Shoulders	...	...	61 lbs.	Abscesses
21	„ Forequarters	...	...	512 lbs.	Abscesses
6	„ Legs	...	...	81 lbs.	Abscesses
13	„ Hindquarter	...	...	272 lbs.	Abscesses
3	„ Loins	...	...	26 lbs.	Abscesses
5	„ Hocks	...	...	18 lbs.	Abscesses
3	„ Legs	...	...	71 lbs.	Bruising
1	„ Forequarter	...	...	18 lbs.	Bruising
4	„ Forequarters	...	...	86 lbs.	Pleurisy
7	„ Shanks	...	...	14 lbs.	Ulcers
	Pork Trimings	...	...	69 lbs.	Abscesses
	„ „	...	...	83 lbs.	Decomposition
	„ „	...	...	22 lbs.	Bruising
	Pigs' Heads	...	...	220	Tuberculosis
	„ „	...	...	1	Erysipelas
	„ „	...	...	7	Abscesses
	„ „	...	...	1	Decomposition
	„ Livers	...	...	93	Cirrhosis
	„ „	...	...	35	Necrosis
	„ „	...	...	4	Peritonitis

Pigs' Livers ...	...	...	3	Cysts
„ „ ...	...	...	2	Fatty Infiltration
„ Lungs (sets of)	...	...	1	Tuberculosis
„ „ „ „	...	2078		Pneumonia
„ „ „ „	...	642		Pleurisy
„ Plucks ...	...	...	3	Tuberculosis
„ „ ...	...	101		Pleurisy and Peritonitis
„ „ ...	...	...	1	Cysts
„ Hearts ...	...	938		Pericarditis
„ „ ...	...	...	1	Endocarditis
„ Mesenteric Fats	...	58		Tuberculosis
„ Kidneys	...	14		Nephritis
„ „ ...	...	...	7	Cysts
„ „ ...	...	...	2	Bruising
„ Flair Fats	...	50		Peritonitis
„ „ „ ...	...	...	1	Cysts
„ Stomachs & Intestines	...	37		Peritonitis
„ „ „ „	...	1		Cysts

Carcases Inspected and Condemned.

	Cattle excluding cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed (if known) ..	462	1037	12	2396	22858
Number Inspected ..	462	1037	12	2396	22858
<i>All Diseases except Tuberculosis and Cysticerci :—</i>					
Whole carcases condemned	1	5	Nil	3	101
Carcases of which some part or organ was condemned	28	67	Nil	10	3406
Percentage of the number inspected affected with disease other than tuber- culosis ..	6.3	6.9	Nil	0.54	15.3
<i>Tuberculosis Only :—</i>					
Whole carcases condemned	Nil	1	Nil	Nil	Nil
Carcases of which some part or organ was condemned	Nil	1	Nil	Nil	224
Percentage of the number inspected affected with tuberculosis ..	Nil	0.19	Nil	Nil	0.98
<i>Cysticercus :—</i>					
Carcases affected ..	1	Nil	Nil	Nil	Nil
Carcases subjected to freez- ing treatment ..	1	Nil	Nil	Nil	Nil

MILK AND OTHER FOODS

20 official samples of milk were purchased from retailers of the district and submitted to the Public Analyst for analysis. All were reported upon as being genuine milk.

The majority of milk sold in the district is processed and bottled at large dairies in nearby towns where a close check on quality and cleanliness is made. These dairies possess their own laboratories and qualified staff for this purposes. Under these circumstances frequent sampling is unnecessary.

All food preparation and sales premises are inspected regularly and a good standard is maintained by most of them. All comply with the requirements of the food hygiene regulations and bye-laws. During the year it has only been necessary to issue one letter asking for work to be carried out.

During the year 350 visits were made and it was found necessary to condemn the following articles of food for the reasons shown.

Jellied Veal	... 18 lbs.	Decomposition
Corned Beef	... 36 lbs.	„
Ox Tongue	... 36 lbs.	„
Chopped Pork	... 8 lbs.	„
Beaf Steak	... 17 lbs.	„
Luncheon Meat	... 4 lbs.	„
Tomatoes	... 8 lbs.	„
Frozen Kidneys	... 14 lbs.	„
Pork Loin	... 52 lbs.	„

BAKEHOUSES

36 inspections were made of the bakehouses in the district and only minor defects were found, and these were made good on verbal intimation to the owners concerned. There are only 3 bakehouses in the district.

ICE CREAM

During the year 12 samples of Ice Cream were taken for bacteriological examination, and of these 11 were grade I and one was grade II.

There are no Ice Cream manufacturers in the district and all Ice Cream sold in the shops is prepacked and of well known proprietary brands. 47 shops were registered for the sale of Ice Cream under the Food and Drugs Act, 1955 and these are regularly inspected.

There is an increase in the amount of Ice Cream being prepared in the vehicles and sold as it is made, as a soft Ice Cream. This form of Ice Cream is not wrapped and owing to contamination possibilities greater care should be taken in its handling, manufacture, and sterilisation of equipment.

FOOD HAWKERS

26 hawkers are registered under the West Riding (General Powers) Act, Section 76, and 14 premises for the storage of food for hawking.

This method of selling is becoming still more popular and whilst there is an improvement in the type of vehicles being used, particularly those used by recognised firms, there are still some vehicles that have been converted from other types of vehicles which leave a lot to be desired.

The vans are inspected as and when they are seen in the district and during the year 80 inspections were made.

OFFENSIVE TRADES

No offensive trade is carried on in the district although fat melting and extracting is carried on, on a small scale, at the bacon factory, a kitchen waste processing plant, and at the Knacker's Yard, Kirkhamgate.

During the year the Knacker's Yard at Kirkhamgate has been the subject of complaints from the neighbourhood due to the offensive odour emanating from the plant installed for the purpose of meat sterilisation and which is used for fat extracting at the same time. The cause of the nuisance is the unsatisfactory type of equipment used and the age of the material processed and the owner is to discontinue its use and install new plant.

In other matters the Knacker's Yard is kept in a satisfactory condition respecting structural conditions and cleanliness.

FISH AND CHIP SHOPS

There are 18 shops registered with the Council under the Food and Drugs Act. During the year 40 visits were made to these premises. There is a good class of shop in the district generally and improvements are continually being made.

One firm was registered for the sale of Fish and Chips from a Mobile Van but the use of this appears to have been discontinued.

FACTORIES AND WORKSHOPS

109 visits were made to factories and workshops in the district and the premises found to be satisfactory. No notices were received from H.M. Inspector of Factories in respect of any fault found in his department.

The number of premises on the register at the end of the year was 30 with and 13 without, mechanical power.

SMOKE ABATEMENT

The main sources of smoke from industrial chimneys in the district are two colliery chimneys, three brickwork chimneys, and three small factory chimneys.

In addition, at times nuisance is caused in the area around Lofthouse Colliery by smoke from the shunting engines in the colliery yard and main line engines which stand in the railway station. The diesel electrification along the length of main line is becoming more pronounced and the number of steam engines gradually reducing.

Lofthouse Colliery chimney, which has been the chief source of complaint for many years has at last been removed from this position by the electrification of the winding gear, etc. This took place in August, 1961 and since then there has been no further cause for complaint. The only other chimneys now causing trouble on any scale at all are those of the brickworks.

All new houses built in the district are subject to the bye-law requiring the installation of grates suitable for the burning of smokeless solid fuel, but in spite of this, bituminous coal still remains the principal fuel.

Electricity and gas continue to gain favour for cooking purposes and less and less people are installing the

combination type fireplace. The Council have in their latest schemes for new houses and bungalows adopted the policy of allowing a choice of independent cooker with a tiled fireplace and no combination fireplaces are at present being fitted in new Council properties.

During the year 99 old pre-war fireplaces were replaced in Council houses and these were replaced by 23 modern type combination fireplaces and 76 tiled fireplaces, with 33 gas cookers and 38 electric cookers.

The question of Miners' home coal still complicates the setting up of smokeless zones in the area and until a national agreement is reached on this issue, it will be difficult for the full requirements of the Clean Air Act respecting Smokeless Zones to be implemented.

During the year 20 observations were taken of the various chimneys in the district. Of these, 3 gave readings of smoke emission for periods in excess of two minutes in thirty.

COLLIERY TIPS

There is no nuisance from Colliery tip fires as the tips in the area which did cause trouble have now burned themselves out.

The tip at Stanley which is used by Newland Colliery, whilst at times shows slight signs of fire is not sufficient to cause a nuisance.

In view of the demand for red shale, there is a considerable amount of this material being taken from the Lofthouse Colliery tips and it is in the foreseeable future that the whole of the old tips will be cleared away and the sites restored to good land.

There is no nuisance now from the newer tip in the Rothwell area which abuts on Lingwell Nook Lane as the attention given by the N.C.B. to the tip has kept down the fire and the fumes to a very reasonable level on the Stanley side.

HOUSING

General Housing inspections still take up a considerable amount of time although Slum Clearance work and the Rent Act have reduced the number of housing repair complaints. The acute shortage of labour for general

housing repairs still continues. Shortage of building labour is still experienced in the Council's own maintenance staff, particularly in the bricklaying trade, and costs have continued to increase considerably and this was more so this year by the reduction in the working week hours to 42. Much of the work outstanding on repair notices have had the work set out arranged by the owners but awaiting attention of the tradesmen concerned. In view of this shortage of labour, routine general housing inspections are not carried out as routine work of the department but only where Clearance Action is contemplated or where complaints have been made by the tenant.

3 applications were received during the year for certificates of disrepair and in all cases the certificates were granted. Eventually in the case of two of the properties the owner sold these to the Council who will no doubt go ahead with the repairs and also carry out full improvements to the property with the help of an improvement grant.

The suggested Slum Clearance programme has continued during the year when houses were dealt with under the various Clearance sections of the Housing Acts. 3 Clearance areas containing 25 houses were represented and confirmed. In only one case was there an appeal by owners and this was not allowed. The remaining 12 houses were dealt with as individual unfit houses and in no case was there any appeal or opposition by the owners.

40 Council dwellings were completed during the year compared with 38 last year. 20 of these were 2 bedroom type and 20 single bedroomed bungalows.

All the new houses were let to tenants of condemned houses in order to attract the Government subsidy, although as in the past, by the arrangement of transfer and exchange, the best possible use of the available accommodation has been made. During the year 18 transfers were made, these being arranged and allowed between tenants of three bedroomed Council houses, transferring to single bedroomed bungalows, and the 3 bedroomed houses being allocated to families.

44 relettings of Council houses during the year were as follows:—8 to families in lodgings, 15 to overcrowded families, 15 aged persons' bungalows or flats and 6 to special cases.

The total number of houses, flats, and bungalows owned by the Council at the end of the year was 1,780.

In spite of the 908 houses built by the Council since the end of the war and the extensive private residential development throughout the area, there is still a shortage of housing accommodation in the district. Building land becomes scarcer and harder to obtain with a subsequent increase in prices being demanded for land.

143 houses were built during the year by private builders but only very few of these have been sold to persons on the Council application list or already living in Council houses.

In view of the Government subsidy policy all new houses built by the Council have been utilized for the rehousing of Slum Clearance tenants and whilst this policy continues it will be many years before many of the young couples in lodgings will be given the offer of a Council house owing to the very small number of relets which become available from time to time.

The Council's application list at 31st December, 1961 showed the following applicants for Council houses, which is an increase of 18 over last year's list:—

In Lodgings	...	57
Not in Lodgings	...	255
Bungalows or 1 bed-		
room flats	...	149
		<hr/>
		461
		<hr/>

The Council are proceeding with their scheme for the replacement of fireplaces in their pre-war estates at a weekly rent increase of 2/- per week to cover the cost of approximately £52 for the replacement.

99 fireplaces were replaced during the year, as follows:—23 Combination Ranges and 76 Tiled Fireplaces, with Gas or Electric cookers.

From these figures it is obvious that the combination range is rapidly losing favour even in the mining areas and is giving way to the tiled fireplace and independent cooker.

7 inside W.C's were installed in pre-war Council houses which had external W.C's, an additional rent of 1/- per week being charged for this improvement.

During the year 25 refrigerators were installed on rental to tenants of both pre-war and post-war houses. There are now 429 refrigerators installed in Council property on rentals ranging from 1/7 to 2/4 per week.

36 improvement grants were made during the year for the improvement of older type houses, mainly towards the cost of provision of hot water and bath system and inside W.C's. In all the cases the applicants were owner/occupiers.

OVERCROWDING

The Council's points scheme is based upon bedroom accommodation rather than total room accommodation and on this standard 39 applicants for Council houses, not including persons living in lodgings, were living in overcrowded conditions. In addition to this, 23 families occupy houses where the sleeping accommodation causes moral overcrowding. No statutory overcrowding has been notified or found by inspection.

PRIVY CONVERSIONS

Following the completion of the sewer in Batley Road, Kirkhamgate, 9 privies were abolished and 14 W.C's provided, so that each house now has the sole use of a water closet.

The 7 pail closets at the British Transport Commission's property at Stanley Ferry were also replaced with W.C's and a small sewage disposal scheme installed. This completes the Council's programme for the replacement of privies and pail closets.

There are 5,729 houses provided with water closets.

CESSPOOLS AND SEWAGE WORKS

The road gullies and 15 cesspools in the district have all been cleansed regularly by the Council's 750 gallon mechanical gully and cesspool emptier. The machine has continued to be loaned to the Ossett M.B.C. and Horbury U.D.C. and has allowed an economical service to be provided. The new Yorkshire Karrier gully/cesspool emptier purchased last year has worked satisfactorily and economically.

Gross income from other Authorities during the year amounted to £1,145.

New sewers have been laid in Canal Lane and Bottom Boat Road in place of the sewers which had subsided.

WATER SUPPLY

As from 1st October, 1961, the supply and distribution of water was taken over by the Wakefield and District Water Board. The supply has been of a satisfactory quality and the Board has commenced to carry out works of renewal to improve low pressure and poor supply experienced in some parts of the district.

TENTS AND CARAVANS

Three caravans are used as permanent dwellings. Both the sites at the rear of the "Drum and Monkey" hotel and "Sun Inn" have been used by travelling showmen and salesmen and constant visits have been made to see that no nuisance is caused. The first site is not satisfactory owing to lack of facilities and poor surface but the "Sun Inn" site with water closets, wash house, and water taps, together with the better surface of the area is an improvement. The pressure of itinerant caravans however tends to create nuisance and complaints from the nearby residents.

VERMINOUS PREMISES

One house was treated by liquid insecticide for bed bug infestation, the need for this service is now very infrequent.

The houses of persons allocated Council tenancies are inspected prior to removal and where necessary sprayed.

All the refuse tips are treated for cricket and fly infestations at regular intervals during the warmer weather.

115 properties were treated for the eradication of rats and mice, the only major infestations being on the refuse tips and sewage works.

URINALS

The two urinals in the district have been regularly cleansed and are satisfactory but the provision of public convenience in the district for both sexes is becoming more necessary and it is hoped that such provision will be commenced in the near future.

CLEANSING

The cleansing of the district is carried out by direct labour, consisting of one foreman, three drivers, and eleven labourers. The average collection period has been 9—10 days but occasional interruptions due to sickness, holidays, and bad weather, have been unavoidable. In spite of this, only isolated complaints have been received.

All choked drains have been cleansed by the department and the urinals regularly cleansed and maintained.

A full staff has been maintained and no labour problems have been felt.

Two S. & D. fore and aft tippers, one Karrier Bantam, and one 11-year old petrol driven Karrier Bantam are the vehicles employed. The last mentioned vehicle should be replaced next year when the whole fleet of vehicles will be diesel engined and the saving of fuel costs continued.

Tipping is carried out at Lee Moor, Ferry Lane, and Jerry Clay Lane, and some nuisance has been caused by tip fires. These have been sealed off as and when suitable material has been available.

During warm weather the tips have been regularly treated for insect infestation and they are also surveyed and treated at regular intervals for rodent infestations.

Some annoyance has again been caused by private individuals and concerns using the tip for disposal of private refuse.

The work of salvaging waste material has continued and the collection, baling and sale of waste paper has resulted in a total of £993 during the year. The paper has been sorted into two different grades before despatch with a price of £7 10s. 0d. (rising to £8 in April) for mixed paper, and £8 10s. 0d. for newsprint.

Baling of salvaged paper is done in the electric baling press purchased six years ago and this continues to give satisfactory service. Paper collected is baled the same night by two men working overtime at the rate of £2 10s. 0d. per ton.

As a result of the waste paper bonus scheme the men were paid £254 for the 122 tons collected.

Now in its tenth year, the scheme for the provision

of dustbins at a charge on the rates has continued satisfactorily. During the year under review 297 dustbins have been renewed. As a result of the scheme there are now no bad bins with consequent improvement in the storage and collection of household refuse.

PETROLEUM SPIRIT STORES

20 licences for the storage of petroleum spirit are in force in the district; the quantity of spirit stored ranging from 25 to 12,500 gallons. Regular visits have been made to all these premises to ensure that the regulations and safety precautions are complied with.

MISCELLANEOUS TABLE

Letters sent out — GENERAL — 3,020

Informal notices — HOUSING — 286

I remain, Gentlemen,

Your obedient servant,

D. WALKER.

